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# **Health**

## **Lower Primary**

### **Syllabus**



DEPARTMENT OF EDUCATION

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**Issued free to schools by the Department of Education**

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Teachers, inspectors, tertiary educators, community members, representatives from non-government organisations and the Health Subject Advisory Committee have developed this syllabus through meetings, workshops and consultations.

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# **Contents**

Secretary's Message .....	iv
Introduction .....	1
Rationale .....	2
Curriculum Principles .....	3
Aims .....	10
Content Overview .....	11
Learning Outcomes .....	13
Learning Outcomes and Indicators .....	14
Assessment and Reporting .....	21
References .....	24
Appendix .....	25

## **Secretary's Message**

Education Reform has been in progress since 1992. The Education Reform has emphasised community-based schooling, the use of bilingual education and bridging to English from vernacular languages, the introduction of Elementary schools, the expansion of Primary schooling to Grade 8 and increased access to Secondary schools at Grades 9 and 10.

This syllabus is to be used by teachers to teach Grades 3, 4 and 5 students throughout Papua New Guinea. The syllabus builds upon concepts, skills and attitudes from Elementary and links to concepts, skills and attitudes in Upper Primary.

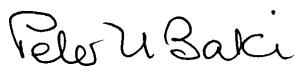
Students' language abilities, already gained in their home environments and during the previous years of schooling, must be respected, built on and extended. Vernacular languages have a large part to play in our students' formative years and their first language should be used to promote a deeper understanding of difficult concepts when this is appropriate.

This syllabus is based on the Curriculum Principles of Our Way of Life and Integral Human Development. These principles focus on healthy lifestyles and values, the importance of relationships, and living and working together harmoniously. The syllabus encourages students to take informed action to promote their own health and health in their local community.

This syllabus embraces a wide range of personal and community health issues related to personal growth and development, nutrition, safety, substance abuse, relationships, health service provision and the impact of environmental influences.

Consultation and cooperation between school, home and community will ensure health is addressed in a way that meets the needs of students, supports the role of parents and is sensitive to the values, attitudes, beliefs and practices of the community. All students should be encouraged to participate in all activities to enable them to reach their full potential in all aspects of their lives, and to realize the importance of being a healthy, respected, responsible citizens.

I commend and approve this syllabus as the official curriculum for Health to be used in all Lower Primary schools throughout Papua New Guinea.



**PETER M. BAKI, CBE**  
Secretary for Education

# Introduction

This syllabus makes explicit the knowledge, skills, attitudes and values that students should achieve for Grades 3, 4 and 5 in Health. These are expressed as learning outcomes and indicators.

The Health Syllabus provides opportunities for students to practise the necessary skills to make informed and responsible decisions about their personal health and wellbeing and the health and wellbeing of their community.

The Grades 3 to 5 Health Syllabus forms part of a continuum of learning across all levels of schooling. Concepts that reflect the curriculum principles underpinning Our Way of Life and Integral Human Development are addressed along the continuum. The learning outcomes describe the progression of learning in Health that students will typically follow over their years of schooling.

Health is to be timetabled for 90 minutes per week in all Lower Primary grades.

Key links between the Elementary, Lower Primary and Upper Primary learning areas, subjects and strands are shown in the table below.

## **Key links between Elementary, Lower Primary and Upper Primary**

	<b>Elementary</b>	<b>Lower Primary</b>	<b>Upper Primary</b>
<b>Learning Area</b>	Personal Development	Personal Development	Personal Development
<b>Subject</b>	Culture and Community	Health	Personal Development
<b>Strands</b>	Me and My Health	Healthy Individuals Healthy Communities	Movement and Physical Activity Our Culture, Lifestyle and Values Health of Individuals and Populations

## **Rationale**

Lower Primary students are becoming more capable of managing their thoughts, emotions and social behaviour. They are confronted with many health issues related to their personal identity, lifestyle habits, interpersonal relationships, community health services and factors in their physical environment. They can be challenged to take action to promote their own health, the health of their families and others as well as the health of their environment.

The Lower Primary Health Syllabus reflects the dynamic and multi-dimensional nature of health and the influence of culture and lifestyle habits, relationships, health services and the environment on the lives and health of Papua New Guinean people.

The syllabus offers students opportunities to develop knowledge, skills, attitudes and values necessary for making informed decisions about:

- improving their own personal health
- promoting health in their community.

Students are encouraged to reflect on the impact of lifestyle behaviour and environmental factors and to take culturally appropriate action to reduce health problems and enhance their own and others' health.

The outcomes enable schools to develop locally relevant and integrated programs. The outcomes lend themselves to students investigating health issues that are real in their community. Students will then be provided with the opportunity to demonstrate their health-related knowledge and to 'do' something with that health knowledge to further promote health.

The syllabus supports the *Language Policy in All Schools* (NDOE, 1999) that recommends bilingual education at Lower Primary. Students are provided with the opportunity to demonstrate the Health outcomes in both their vernacular and English.

The Health Syllabus contains the Lower Primary outcomes for all Papua New Guinean students to achieve. The implementation of this syllabus will contribute to the goals of the National Curriculum and will assist in enhancing the health status of Papua New Guinean society.

# Curriculum Principles

The Health Syllabus is founded on the curriculum principles of Our Way of Life, Integral Human Development and Teaching and Learning and thereby embraces those values and beliefs recognised as being of cultural, social and educational significance.

Teachers should apply the principles when considering what they will teach, how they will teach and how students will learn and apply their learning.

## Our Way of Life

### Cultural relevance

This Health Syllabus provides opportunities for students to engage in health topics and content that are relevant, real and sensitive to the socio-cultural background of Papua New Guinean students. The learning outcomes provide the scope for teachers to choose health issues of specific local relevance and for students to learn about and celebrate health practices of traditional and current life.

Topics of a sensitive nature, such as in the area of growth and development and relationships, must be shaped thoughtfully and carefully. Respect for relevant social taboos is essential and will influence the way in which these issues are addressed as part of the Health program.

### Bilingual education

There are over 800 different spoken languages across Papua New Guinea. Most Papua New Guinean students do not speak English as their first language.

**Bilingual education:**  
*the regular use of two languages for instruction.*

Bilingual education is the regular use of two languages for instruction. Papua New Guinea's Language Policy in All Schools (NDOE, 1999) requires a bilingual approach to education that incorporates bridging to English in Grades 3, 4 and 5. This policy states:

At the Lower Primary level (Grades 3–5) the learning and teaching will be conducted in a bilingual situation, in which there is planned, gradual bridging from vernacular (or the lingua franca) to English. Oral and written vernacular language development will continue throughout Lower Primary. Oral and written English development will gradually be introduced and established as the major language of instruction by the end of Grade 5...

At the Lower Primary level, while English is being learned, the language mostly used for teaching and learning should be the same language that the children used in Elementary school.

Where a number of active languages exist in one community, the main language of interaction between the language groups and of commerce in the community should be the language selected, that is the local lingua franca.

(Ministerial Policy Statement no. 38/99, NDOE, 1999)

Lower Primary uses a bilingual education approach because current international educational research indicates that there are academic benefits for students from being bilingual. Students continue to learn in their first language because learning only in English as a second language can limit their learning and social development. As students become confident in thinking, reasoning, problem solving and decision making in their vernacular, they are more able to learn another language such as English. It is important to continue to develop, expand and enhance vernacular language to the language used by adults in and out of the classroom.

### **Bridging to English**

**Bridging to English:**  
*the gradual change from vernacular to English instruction during Grades 3 to 5.*

Students complete Elementary education in their vernacular. Bridging to English is the gradual change from vernacular to English instruction during Grades 3 to 5. Bridging, while maintaining vernacular language, helps students retain their identity, culture, self-confidence and self-esteem.

The table below shows the gradual progression from vernacular to English. It is anticipated that, as students become more confident in their English skills, the time allocation for vernacular instruction will be reduced. The percentages presented in this table are suggestions only to help teachers see the expected progression.

#### **Suggested Percentage of Teaching, Learning and Assessment in Lower Primary in Vernacular and English**

<b>Grade 3</b>		<b>Grade 4</b>		<b>Grade 5</b>	
vernacular	English	vernacular	English	vernacular	English
60%	40%	50%	50%	30%	70%

Using vernacular language for continued learning and development while English is being learned is an effective way for Papua New Guinean students to develop their full potential.

Bridging to English strategies will be explained with examples in the Teacher Guide.

### **Multiculturalism**

As a multicultural society, we must protect, promote and respect our many cultures and languages. The diversity of our cultures is the source of our knowledge, skills, attitudes and Melanesian values. These values will be promoted and language and literacy knowledge will enable students to share understanding of these with the rest of the world. In the same way, students

will learn to exchange understanding from stories and knowledge from the past relating to their communities and environments. In this way, multiculturalism will be maintained and enjoyed whilst learning experiences will be enriched.

The Health Syllabus acknowledges that health beliefs and practices can vary among people of different race, ethnicity and religion. Health programs should provide students with opportunities to explore such differences and to value and appreciate difference among cultures. Students should be encouraged to think critically about any differences and to identify those that can contribute to improving their personal health and or the health of their own community.

### **Ethics, morals and values**

Health provides opportunities for students to know how to interact with one another. It addresses socialisation through providing opportunities for students to:

- learn in the language of their own community
- interact with significant members from their community, whether school, church, elders or chiefs
- learn about laws, rights and responsibilities
- reflect on the consequences of behaviour
- propose appropriate behaviour
- engage in activities that support the development of their community.

Teachers need to be aware that they communicate and reinforce ethics, morals and values through content, methods and role modelling.

## **Integral Human Development**

### **The right to healthy living**

Health provides opportunities for students to enhance their physical, social, emotional and mental health. It also provides opportunities for students to understand the interrelationship between environment and health and to acquire the skills that enable them to contribute to the health status of their community, including its natural environment.

Health allows schools to address health issues of local relevance and of importance to people in Papua New Guinea and helps students to develop skills to promote their own health and the health of their community.

Ultimately, students learn attitudes, skills and knowledge that will help them become productive, healthy and contented citizens of Papua New Guinea.

**Nation building and national unity**

Health provides opportunities for students to contribute to the development of Papua New Guinean society by taking health action in their local community. Health reflects the Constitution and emphasises the rules and laws of families, communities and the Nation as well as the duties and obligations that each citizen has in relation to these laws.

Students are encouraged to treat each other equally and fairly regardless of race, place of origin, beliefs, religion or gender. Students learn to take pride in their identity, recognise their capabilities, and take responsibility for their growth and development. They also learn to respect one another and their traditional ways as well as to resolve problems peacefully.

**Sustainability**

Health guides students to appreciate, respect and value their natural environment, cultures, customs and traditions. The health of the environment impacts on the health of Papua New Guinean people. This syllabus provides opportunities for students to understand this interrelationship and to undertake actions that promote both the health of Papua New Guinean people and their environment. Students also acquire cultural knowledge and an appreciation of traditions and customs handed down from generations, for example, those associated with initiation rituals, health practices and food and substance abuse.

**Catering for diversity****Gender**

All Lower Primary syllabuses are designed to cater for the educational needs and interests of both girls and boys. The Department of Education's *Gender Equity in Education Policy* (NDOE, 2003) recommends that no student in the education system of Papua New Guinea will be disadvantaged on the basis of gender.

To implement the policy, teachers have the responsibility to use and promote gender equity practices in their classrooms and within the wider community. This means they will provide:

- a curriculum that caters for the educational needs of girls and boys
- a safe, challenging learning environment which is socially and culturally supportive
- programs that recognise the contributions to society of both women and men.

In Papua New Guinea, there is a need for sensitivity to local cultural practices and values with respect to traditional roles for males and females. In Health, students will be given equal opportunities to participate in all class and assessment activities regardless of their gender. Health will enable students to develop positive attitudes towards sensitive cultural issues about gender.

In gender-sensitive classrooms, students:

- take turns in being the leader, reporter and taking other roles in group work
- share and participate in activities involving different students
- show respect for other students and their contributions.

#### ***Students with special needs***

Many students have special needs. This includes students who are gifted and those who are disadvantaged. Gifted students should be given opportunities to extend their learning. Students with physical or intellectual impairments and emotional or learning difficulties need special support in the classroom. Teachers have a responsibility to ensure that the learning needs of these students are met. All students are individuals and all have the right to quality education in order to reach their full potential.

## **Teaching and Learning**

In support of the reform agenda, the Health Syllabus promotes programs that are accessible and relevant to all students and are student-centred.

Many teachers of Lower Primary classes prefer to use an integrated approach to teaching and learning. The Health learning outcomes lend themselves to being implemented through integrated programs or separate Health units of work.

The nature of the learning outcomes demands teachers use teaching strategies that nurture in students a range of thinking skills: recalling, applying, analysing, synthesising, predicting and evaluating. Such thinking skills will assist students to solve problems and make wise decisions about health issues faced by themselves and their community.

## **Inclusive curriculum**

All students are individuals and all have the right to quality education in order to reach their full potential. An inclusive curriculum uses content, language and teaching methods that takes account of all students. All Lower Primary syllabuses value the experiences and knowledge of all students, regardless of gender, ability, geographic location, religious and cultural background, or socioeconomic status.

Teachers must ensure that the teaching, learning and assessment activities are inclusive of all students when interpreting and implementing the syllabus learning outcomes. The following statement identifies important requirements of an inclusive curriculum:

- All students have fair access to resources such as time spent with the teacher, space in the classroom, books, equipment and playground space.
- All students have equal opportunity to participate fully in teaching, learning and assessment activities.

- The curriculum includes and addresses the needs and interests of all students: girls as well as boys, gifted students, students with disabilities and students from different cultural and religious backgrounds.
- The experiences and knowledge of all students are valued by teachers and are reflected in classroom practice.
- Teaching and learning methods cater for different learning styles by allowing students opportunities to learn in different ways.
- Teachers use a variety of assessment methods that give students opportunities to demonstrate achievement of learning outcomes.

Teachers have a responsibility to ensure that the curriculum they teach and the classroom practices they use give all students the opportunity to reach their full potential.

Teachers should be alert in recognising disadvantages experienced by particular students and should act to ensure their welfare, rights and dignity. A classroom environment that encourages mutual support and facilitates positive discussion about diversity will assist students to develop self-respect and respect for others. Students are provided with opportunities to explore different and conflicting views, values, morals and ethics relating to health issues. In this way they become more informed about diversity in society and learn to value each other and each other's cultures.

### **Relevance**

Health should help prepare students to manage their own health across their life spans and also to contribute to improving the health status of their community. Health programs should be developed around authentic topics, that is, meaningful topics relevant to the students' lives now and in the future. The syllabus outcomes have been developed in consideration of the typical stage of development of students in Grades 3, 4 and 5 and the nature of the broad health issues confronting Papua New Guinean communities. To identify topics of relevance, teachers should consider the nature of the syllabus outcomes, as well as the nature of health issues faced by their students and the communities in which they live.

### **Student-centred learning**

A student-centred approach to teaching and learning provides students with opportunities to:

- engage with meaningful and relevant topics
- reflect on their existing knowledge and experiences about such topics
- actively participate in activities that enable them to expand their knowledge and develop the skills to take action.

With this approach, students gain knowledge and skills by actively participating and then applying this knowledge to community issues.

Through student-centred approaches, students develop thinking skills that enable them to solve health problems, make decisions, plan for health action and reflect on the effectiveness of their actions.

### **Language development across the curriculum**

Language development across the curriculum should be encouraged because all subject areas provide meaningful contexts for real purpose learning. Specific subjects have different language requirements such as vocabulary and language features. The conventions and differences must be explicitly taught in relevant contexts across the curriculum.

### **Thematic teaching and integration**

Health can be addressed through an integrated approach to teaching and learning. The Health learning outcomes can be linked, in some cases, with outcomes from other subjects. This provides opportunities for teachers to develop integrated teaching and learning programs. This approach also makes it possible for students to see the links with other subjects and the reality in life. Integration with other subjects can help to broaden students' understanding of health issues and enable them to respond more appropriately in real life situations.

While Health can be linked to all subjects at Lower Primary the content links most strongly to Lower Primary Physical Education, Environmental Studies and Community Living syllabuses.

### **Teaching and learning strategies for health**

At Lower Primary an integrated or thematic approach to teaching and learning is recommended. Teachers create programs that are meaningful, appropriate, engaging and motivating to students. The use of learning outcomes provides opportunities for teachers to link learning within Strands of the Health Syllabus and across other subjects.

Whilst using integrated teaching and learning, the following teaching approaches are recommended:

- an inquiry-based approach which focuses on the process of understanding, planning, acting and reflecting
- a guided discovery approach which requires students to use a problem-solving approach while the teacher acts as a facilitator
- collaborative learning which focuses on students working cooperatively together in pairs or small groups
- directed teaching where the teacher directs activities within the lesson.

Teachers will use a combination of these approaches to teach Health. Wherever possible, teachers should involve community members in the teaching and learning of health activities at school.

## **Aims**

The aims of the Lower Primary Health curriculum are for students to:

- raise self-esteem and improve social and physical wellbeing
- understand the multidimensional nature of health and the factors that influence health
- gain relevant knowledge and skills to make informed decisions about healthy living
- acquire relevant decision-making skills to manage health problems
- acquire skills to take appropriate action to promote personal health and the health of communities
- value and promote personal health and safety, healthy relationships, health products and services and healthy environments
- develop attitudes of respect and care towards protecting and promoting personal health, community health and the health of environments.

# Content Overview

Strands are a useful and convenient way of organising the learning outcomes for a subject. Each Strand identifies a particular aspect of Health and shows a typical progression of learning from one grade to the next. Substrands allow the content to be more clearly specified and described as learning outcomes.

## Strands and Substrands

Health in Grades 3, 4 and 5 has two Strands: Healthy Individuals and Healthy Communities.

Within each Strand and Substrand in Grades 3, 4 and 5, the sequence of learning is developmental. The context for learning at each grade becomes more complex from one grade to the next. The following contexts have been identified for each grade:

- Grade 3: Everyday health habits and actions to enhance health in and about the family home
- Grade 4: Specific personal health behaviour, skills and actions to enhance health in and about the school
- Grade 5: Managing specific adolescent health issues and actions to enhance health in the local community.

### Healthy Individuals

This Strand embraces the physical, social, emotional and mental aspects of personal health and how these are influenced by biological factors and individual health choices. It also nurtures in students, practical and thinking skills that enable them to enhance their own and others' personal health.

The Substrands are:

- Growing up
- Personal health
- Nutrition
- Harmful substances
- Safety and first aid.

### Healthy Communities

This Strand embraces aspects of the social and physical environment that influence the health of individuals and communities. It also nurtures the skills that enable students to take action to promote healthier social and physical environments.

The Substrands are:

- Health services
- Healthy environment.

**Strands and Substrands for Health**

<b>Strands</b>	<b>Substrands</b>		
	<b>Grade 3</b>	<b>Grade 4</b>	<b>Grade 5</b>
<b>Healthy Individuals</b>	Growing up	Growing up	Growing up
	Personal health	Personal health	Personal health
	Nutrition	Nutrition	Nutrition
	Harmful substances	Harmful substances	Harmful substances
	Safety and first aid	Safety and first aid	Safety and first aid
<b>Healthy Communities</b>	Health services	Health services	Health services
	Healthy environment	Healthy environment	Healthy environment

**Learning Outcomes and Indicators**

The Strands and Substrands are expressed as learning outcomes and indicators.

**Learning outcome:**  
a specific statement that identifies the knowledge, skills, attitudes and values all students should achieve or demonstrate.

A learning outcome is a specific statement that identifies the knowledge, skills, attitudes and values all students should achieve or demonstrate.

These statements are student-centred and written in terms that enable them to be demonstrated, assessed or measured. For example, outcome 4.1.2 Justify and promote behaviour that can improve the health of others at school.

**Indicators:**  
examples of the kinds of things students should be able to do, know and understand if they have achieved an outcome.

Indicators are examples of the kinds of things students should be able to do, know and understand if they have achieved an outcome.

Each learning outcome is accompanied by a set of indicators. Indicators are what students do, know and understand if they have achieved the learning outcomes. Learning outcomes help teachers to determine the standard expected of students at particular grades in particular subjects. Indicators are examples only and should not be used as checklists.

The learning outcomes and indicators will:

- give teachers, individually or collaboratively, the flexibility to write programs and units of work. These can be developed to suit local conditions and individual student needs
- help teachers assess and report students' achievements in relation to the learning outcomes
- allow students' achievement of the outcomes to be described in consistent ways
- help teachers monitor student learning
- help teachers plan their future teaching programs.

# Learning Outcomes

## Numbering of Learning Outcomes

Each Learning Outcome is numbered with three digits, such as 3.1.2.

The first number refers to the Grade level. The second number refers to the Strand. The third number refers to the outcome in the Strand.

Thus, 3.1.2 refers to an outcome at Grade 3, Strand 1 and outcome number 2.

Strand	Grade 3	Grade 4	Grade 5
<b>Healthy Individuals</b>	<p><b>3.1.1</b> Identify similarities and differences between individuals and state how each are unique</p> <p><b>3.1.2</b> Justify and demonstrate a range of everyday health habits that help protect and promote personal health</p> <p><b>3.1.3</b> Identify safe and healthy eating habits and plan ways to apply these at home</p> <p><b>3.1.4</b> Identify harmful substances in the home and propose ways to reduce the risk of harm to family members</p> <p><b>3.1.5</b> Demonstrate ways to deal with unsafe and emergency situations in the home</p>	<p><b>4.1.1</b> Describe changes in growth and development and plan measures to protect personal health</p> <p><b>4.1.2</b> Justify and promote behaviour that can improve the health of others at school</p> <p><b>4.1.3</b> Explain the benefits of eating from the food groups and assist in preparing healthy meals</p> <p><b>4.1.4</b> Describe the effect of harmful substances on personal health and demonstrate ways to make wise choices about their use</p> <p><b>4.1.5</b> Demonstrate ways to deal with unsafe and emergency situations in the school</p>	<p><b>5.1.1</b> Identify changes that occur during puberty and propose actions to promote health and growth</p> <p><b>5.1.2</b> Identify causes of common illnesses and take action to promote behaviour that reduces health risks</p> <p><b>5.1.3</b> Assess the nutritional value of different foods and take action to promote healthy food choices</p> <p><b>5.1.4</b> Evaluate the impact of harmful substances on young people and take action to encourage healthy choices</p> <p><b>5.1.5</b> Demonstrate and evaluate strategies to deal with unsafe and emergency situations in the community</p>
<b>Healthy Communities</b>	<p><b>3.2.1</b> Explain how health products and people in the community help to promote health in the home</p> <p><b>3.2.2</b> Discuss the need to care for their homes and demonstrate actions to keep them healthy</p>	<p><b>4.2.1</b> Assess the availability of health products and services in the school and propose ways of improving student access</p> <p><b>4.2.2</b> Survey unsafe situations at school, make plans and take action to reduce harm and promote health</p>	<p><b>5.2.1</b> Identify health services and products in the community and plan ways to assist and care for the services</p> <p><b>5.2.2</b> Assess unsafe situations in the community and take action to reduce harm and promote health</p>

# Learning Outcomes and Indicators

## Strand: HEALTHY INDIVIDUALS

Substrand	Grade 3	Grade 4	Grade 5
<b>Growing Up</b>	<p><b>3.1.1</b> Identify similarities and differences between individuals and state how each are unique</p>	<p><b>4.1.1</b> Describe changes in growth and development and plan measures to protect personal health</p>	<p><b>5.1.1</b> Identify changes that occur during puberty and propose actions to promote health and growth</p>
<p><i>All indicators are listed as bullet points after each outcome. The list of indicators always begins with the statement: Students will be achieving the above learning outcomes in vernacular and/or English, when they for example;</i></p> <p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>• record and compare students' weights and heights</li> <li>• label an image or drawing with the differences between themselves and the opposite sex</li> <li>• discuss and compare common interests, roles and responsibilities</li> <li>• discuss influences such as race, religion, culture that make them different from one another</li> <li>• make posters to show their special features and present them to the class</li> <li>• show a sample product that they personally produced and explain how they made it</li> <li>• demonstrate or teach the class a special skill they wish to share</li> <li>• make and display personal details such as name, date and place of birth, height, weight, likes and dislikes.</li> </ul>			

## Strand: HEALTHY INDIVIDUALS

Substrand	Grade 3	Grade 4	Grade 5
<b>Personal Health</b>	<p><b>3.1.2</b> Justify and demonstrate a range of everyday health habits that help protect and promote personal health</p>	<p><b>4.1.2</b> Justify and promote behaviour that can improve the health of others at school</p>	<p><b>5.1.2</b> Identify causes of common illnesses and take action to promote behaviour that reduces health risks</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>• explain why it is important to keep hands and fingernails clean</li> <li>• discuss and role play how to keep their body and hands clean</li> <li>• discuss when to wash hands such as before eating, preparing food, after using the toilet</li> <li>• explain the need to keep bodies and clothes clean</li> <li>• label the different types of teeth such as canines and molars and describe their different uses</li> <li>• describe how to care for and maintain healthy teeth</li> <li>• explain why spitting in public is unhygienic and a bad habit.</li> <li>• give reasons why it is important to be neat and clean</li> <li>• describe how exercising their body contributes to good growth and health</li> <li>• make posters to show the importance of having plenty of rest for good growth and health</li> <li>• brainstorm and list different activities people do to relax their minds and bodies</li> <li>• develop a plan to show how they will relax their minds and bodies</li> <li>• explain why being overweight or underweight is unhealthy for good growth</li> <li>• demonstrate ways to treat and care for hair such as regular shampooing and treating dandruff and lice.</li> <li>• survey people in the community to identify common diseases and sicknesses and present their findings</li> <li>• identify the causes and cures of common sicknesses</li> <li>• discuss how to prevent malaria and take actions to protect themselves</li> <li>• describe what germs are and how they cause sickness</li> <li>• explain what communicable diseases are and list ways to prevent catching them</li> <li>• explain the differences between communicable and non-communicable diseases</li> <li>• identify and describe how insects and animals spread diseases and recommend ways to prevent them spreading</li> <li>• describe sexually transmitted infections and recommend ways people can avoid catching them</li> <li>• discuss tuberculosis and suggest ways to protect themselves and others from the disease.</li> </ul>			

## **Strand: HEALTHY INDIVIDUALS**

<b>Substrand</b>	<b>Grade 3</b>	<b>Grade 4</b>	<b>Grade 5</b>
<b>Nutrition</b>	<p><b>3.1.3</b> Identify safe and healthy eating habits and plan ways to apply these at home</p>	<p><b>4.1.3</b> Explain the benefits of eating from the food groups and assist in preparing healthy meals</p>	<p><b>5.1.3</b> Assess the nutritional value of different foods and take action to promote healthy food choices</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>list the main ideas presented by a guest speaker on the importance of eating healthy food</li> <li>explain the importance of regular meals and discuss daily meal requirements for family members such as pregnant mothers, babies, older people</li> <li>analyse their daily meals and discuss why quality is more important than quantity in relation to good health and growth</li> <li>demonstrate hygienic ways to prepare healthy food and suggest ways they can do this at home</li> <li>brainstorm and list places such as the garden, store, markets and bushes where healthy foods can be obtained</li> <li>role play how to clean and store utensils after eating</li> <li>describe how to prepare and store food in safe places away from insects.</li> </ul> <ul style="list-style-type: none"> <li>group local foods into the three food groups: protective food, food for growth and energy food</li> <li>analyse different local foods and identify junk foods and take actions to avoid eating them</li> <li>explain and discuss the benefits of eating healthy food</li> <li>demonstrate how to prepare, cook and serve a healthy and balanced meal</li> <li>analyse their daily meals to check if there is a balance from the three food groups</li> <li>recommend ways to keep lunches safe from dust and insects.</li> </ul>			

## Strand: HEALTHY INDIVIDUALS

Substrand	Grade 3	Grade 4	Grade 5
<b>Harmful Substances</b>	<p><b>3.1.4</b> Identify harmful substances in the home and propose ways to reduce the risk of harm to family members</p>	<p><b>4.1.4</b> Describe the effect of harmful substances on personal health and demonstrate ways to make wise choices about their use</p>	<p><b>5.1.4</b> Evaluate the impact of harmful substances on young people and take action to encourage healthy choices</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>• identify and display sample pictures or drawings of harmful substances found in the home</li> <li>• describe how chewing betelnut affects health</li> <li>• describe how smoking tobacco at home can cause ill health to both the smoker and non-smoker</li> <li>• explain and discuss other effects of smoking such as odour, fire, litter</li> <li>• role-play how to say 'no' to bad habits such as smoking, chewing betelnut, spitting.</li> <li>• discuss and list harmful substances found and used in schools</li> <li>• listen to people who have had bad habits with drugs and substance abuse and describe how they were introduced to and quit those habits</li> <li>• survey students' habits in regard to drugs and other harmful substances and develop an awareness campaign to change their habits</li> <li>• role play how to say 'no' to drugs and habits such as smoking, chewing betelnut, drinking alcohol</li> <li>• plan a campaign against a habit such as chewing betelnut or drugs by performing singsongs, displaying posters, composing songs and telling stories.</li> <li>• identify illegal drugs such as marijuana and describe their effects on personal health</li> <li>• identify substances harmful to good health, such as home-brew alcohol, tuba brus and sniffing petrol and recommend ways to remove them from the community</li> <li>• dramatise how to say 'no' to marijuana and other harmful drugs</li> <li>• identify useful drugs and describe how they are used safely to improve personal health</li> <li>• describe how alcohol is harmful to health and a cause of social problems in the community</li> <li>• explain why people take drugs and other harmful substances and propose alternative solutions to their problems</li> <li>• discuss and identify activities such as gardening, sports competitions and clubs that encourage healthy lifestyles and choices.</li> </ul>			

## **Strand: HEALTHY INDIVIDUALS**

<b>Substrand</b>	<b>Grade 3</b>	<b>Grade 4</b>	<b>Grade 5</b>
<b>Safety and First Aid</b>	<p><b>3.1.5</b> Demonstrate ways to deal with unsafe and emergency situations in the home</p>	<p><b>4.1.5</b> Demonstrate ways to deal with unsafe and emergency situations in the school</p>	<p><b>5.1.5</b> Demonstrate and evaluate strategies to deal with unsafe and emergency situations in the community</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>use a checklist to investigate unsafe situations at home</li> <li>discuss and list how accidents occur at homes such as with hot water or sharp instruments</li> <li>state how to prevent accidents with hot water and poisons</li> <li>demonstrate how to assist someone with hot water or fire burns</li> <li>list causes of fire at home and recommend ways to prevent it</li> <li>propose ways to prevent family members from injuring themselves with fire</li> <li>recommend ways to safely store substances at home, such as medicine, kerosene, poisons</li> <li>demonstrate and explain how to clean cuts and scratches and apply clean dressings.</li> <li>explore and develop a list of unsafe situations at school</li> <li>review current storage of dangerous goods and equipment at school and recommend ways to store them more safely</li> <li>establish safety rules for keeping, using and sharing sharp tools such as knives, razors, garden tools</li> <li>demonstrate how to treat insects or objects in the ear or objects in the eye</li> <li>explain the purpose of road signs and demonstrate safe ways to cross the road</li> <li>write and display sign posts and warnings for dangerous places and sites at school</li> <li>investigate the school's water sources and recommend how to make water safe for drinking</li> <li>identify unsafe surroundings in the classroom and school grounds and suggest ways to improve them.</li> <li>identify and list unsafe situations in the community</li> <li>discuss the causes of bushfires in the community and propose ways to prevent them</li> <li>examine different sources of water in the community and demonstrate ways to keep water sources clean</li> <li>propose safety rules and precautions when going fishing or on a picnic at the beach or river</li> <li>survey the community for toilets and rubbish pits and recommend ways to make them more hygienic</li> <li>suggest ways to assist old or sick people with needs such as building toilets, digging rubbish pits</li> <li>participate and assist people with disabilities with needs such as making their homes safer.</li> </ul>			

## Strand: HEALTHY COMMUNITIES

Substrand	Grade 3	Grade 4	Grade 5
<b>Health Services</b>	<p><b>3.2.1</b> Explain how health products and people in the community help to promote health in the home</p>	<p><b>4.2.1</b> Assess the availability of health products and services in the school and propose ways of improving student access</p>	<p><b>5.2.1</b> Identify health services and products in the community and plan ways to assist and care for the services</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>• identify health products used at home and make a display of empty health product containers, labels and packages</li> <li>• discuss the uses of various health products used at home</li> <li>• describe some local leaves, roots and fruits used as medicine to assist in personal cleanliness and health</li> <li>• describe the roles of health workers and community members who promote good health in the home.</li> <li>• identify health products available for student use in the school such as toilet paper, soap, rubbish bins</li> <li>• identify the nearest health clinic or aid post and discuss its usefulness to students and teachers</li> <li>• summarise the common sicknesses treated at the local clinic or aid post after listening to a talk by the health officer</li> <li>• recommend ways to help care for and improve health services in the school.</li> <li>• identify various organisations in the community such as Red Cross or other NGOs and discuss their roles in improving health</li> <li>• explain what immunisation is and suggest ways to encourage parents with young children to attend immunisation clinics</li> <li>• sort the range of health products available at the local chemist or trade store under categories such as medicines, personal hygiene products, first aid items</li> <li>• explain the roles of health services such as the ambulance service, clinics, aid posts</li> <li>• describe how health services help the community.</li> </ul>			

## **Strand: HEALTHY COMMUNITIES**

<b>Substrand</b>	<b>Grade 3</b>	<b>Grade 4</b>	<b>Grade 5</b>
<b>Healthy Environment</b>	<p><b>3.2.2</b> Discuss the need to care for their homes and demonstrate actions to keep them healthy</p>	<p><b>4.2.2</b> Survey unsafe situations at school, make plans and take action to reduce harm and promote health</p>	<p><b>5.2.2</b> Assess unsafe situations in the community and take action to reduce harm and promote health</p>
<p><b>Indicators</b> Students will be achieving the above learning outcomes in vernacular and/or English, when they, for example:</p> <ul style="list-style-type: none"> <li>gather and present information to show unsafe or unhealthy places in their homes or surroundings and propose ways of improving them</li> <li>describe how fresh air and light contribute to making the home healthy</li> <li>discuss water and rubbish problems at home and recommend ways to improve them</li> <li>recommend ways to keep the inside of homes neat and clean such as sweeping, washing clothes and putting bedding out in the fresh air</li> <li>role play ways to care for their homes and surroundings and take action to keep them healthy.</li> </ul>			<ul style="list-style-type: none"> <li>survey and act on unsafe and unhealthy areas in the school to reduce harm and promote health</li> <li>list and explain why it is important to keep the school environment clean</li> <li>examine water sources, water storage containers and rubbish pits and recommend ways to improve them</li> <li>discuss and plan how to improve the cleanliness of the school</li> <li>develop and implement classroom rules to keep the classroom safe, neat and tidy</li> <li>plan and organise awareness on the importance of keeping the school and classrooms clean and safe.</li> </ul> <ul style="list-style-type: none"> <li>survey and act on unsafe and unhealthy areas in the community to reduce harm and promote health</li> <li>discuss, plan and participate in simple manageable tasks to improve unsafe areas in order to improve health</li> <li>organise sign boards and notices to warn the public about unsafe areas in the community</li> <li>discuss the importance of caring for warning signs and notice boards</li> <li>plan and organise awareness on the need to keep the community healthy, safe and clean</li> <li>take notes on how to keep the environment neat and clean after listening to invited guests such as councillors, environment and conservation officers.</li> </ul>

# Assessment and Reporting

Assessment and reporting practices described here are detailed further in the *National Assessment and Reporting Policy 2003* (NDOE, 2003) and in other support materials produced by the Department of Education.

## Assessment

**Assessment:**  
*the ongoing process of identifying, gathering and interpreting information about students' achievement of the learning outcomes.*

Assessment is the ongoing process of identifying, gathering and interpreting information about students' achievement of the learning outcomes described in the subject syllabuses.

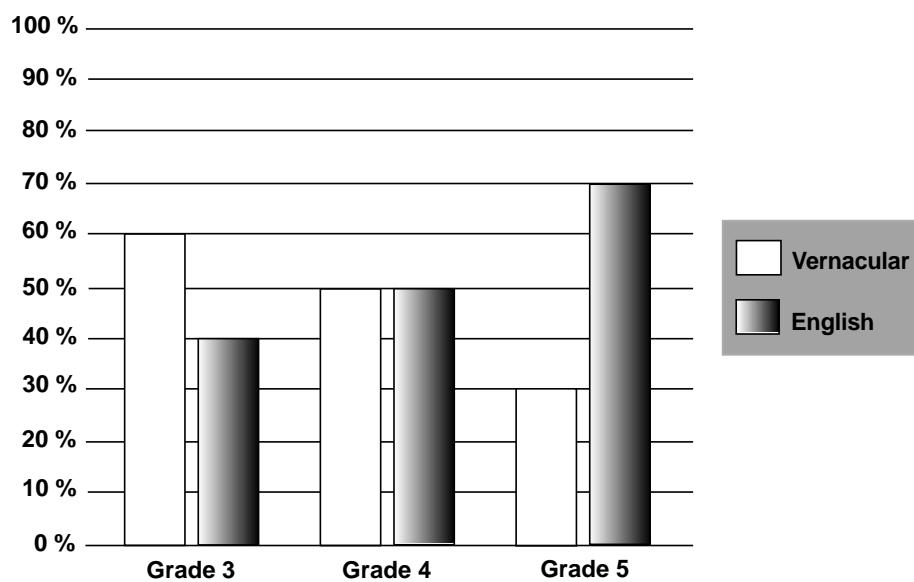
Teachers record evidence of students' learning and use this to make judgements about their achievements of the learning outcomes. To ensure that assessment is fair and balanced, teachers must use a range of assessment methods including:

- observing and recording details of students' performance on particular tasks
- conferencing or talking and questioning the students about their work and how they are thinking and feeling: their attitudes towards work
- analysing students' products
- setting written assignments, projects and practical work
- setting and marking written tests.

Teachers should provide opportunities for students to assess their own learning (self-assessment) and the learning of others (peer assessment) according to set negotiated criteria. The overall purpose of assessment is to improve student learning.

## Assessment in vernacular and English

The suggested percentage of assessment, teaching and learning in vernacular and English is shown below:



Teachers will need to apply the principles described in the *National Assessment and Reporting Policy 2003* (NDOE, 2003) to ensure that students are treated fairly and given many opportunities to demonstrate their achievement of the learning outcomes in each subject. When assessing students' achievements, teachers should be clear about:

- which language best enables students to demonstrate their learning
- whether they are assessing subject content or language skills and knowledge, or both
- whether the percentages of assessment in vernacular and English are similar to those suggested in the graph on the previous page.

### **Assessment in Lower Primary**

Assessment in Lower Primary schooling is the continuous process of finding out if students have achieved the learning outcomes. Assessment at Lower Primary should:

- be predominantly integrated into teaching and learning activities as students bridge from vernacular to English
- use a range of assessment methods
- use local cultural approaches to assess and report students' achievements where appropriate
- be used for diagnostic purposes only.

### **Recording**

Teachers must keep accurate records of students' achievement of the learning outcomes. They must report these achievements in fair and accurate ways to parents, guardians, teachers and students. Examples of recording methods include:

- anecdotal notes in a journal or diary
- checklists
- portfolios of students work
- progressive records
- work samples with comments written by the teacher.

### **Reporting**

**Reporting:**  
*communicating clearly to students, parents, guardians, teachers and others, the information gained from assessing students' learning.*

Reporting is communicating clearly to students, parents, guardians, teachers and others, the information gained from assessing students' learning.

Students' reports should be based on assessment information collected from continuous assessments. Schools will decide on how reports will be

presented to best suit the needs of their communities. Methods will include interviews and written reports. Written reports should include:

- a written record of learning outcomes achieved by students since the previous report
- a written record of the learning outcomes the student is now working towards
- information about students' attitudes, values and other additional information that is specific to individual students.

*(National Assessment and Reporting Policy 2003, NDOE, 2003, p.6)*

### **Evaluation**

Teachers will use assessment information to make judgements about the effectiveness of their teaching, learning and assessment programs and to make improvements to their teaching practice in order to improve student learning.

Schools may use whole school assessment data to evaluate the effectiveness of teaching and learning in a particular subject or at particular grade levels and make decisions on how to improve student learning.

## **References**

### **NDOE**

*NDOE refers to the Department of Education, Papua New Guinea, otherwise referred to as the National Department of Education.*

NDOE 1986, *A Philosophy of Education for Papua New Guinea*, Ministerial Committee Report P. Matane, chair, NDOE, Waigani

NDOE 1999, *Language Policy in All Schools*, Ministerial Policy Statement No. 38/99, NDOE, Waigani

NDOE 2000, *Education for All*, National Department of Education, Waigani

NDOE 2000, *Primary Education Handbook 2<sup>nd</sup> edn*, NDOE, Waigani

NDOE 2002, *National Curriculum Statement*, NDOE, Waigani

NDOE 2003, *Culture and Community Elementary Syllabus 2003*, NDOE, Waigani

NDOE 2003, *Gender Equity in Education Policy*, NDOE, Waigani

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NDOE 2003, *Personal Development Upper Primary Syllabus 2003*, NDOE, Waigani

### **Other**

Baker, C. (1996) *Foundations of Bilingual Education and Bilingualism 2<sup>nd</sup> edn*, Multilingual Matters, Sydney

Dutcher, N. (1995) *The Use of First and Second Languages in Education: A Review of International Experience*, Pacific Islands Discussion Paper Series, No. 1, World Bank, Washington

## Appendix

### **MINISTERIAL POLICY STATEMENT**

#### **Language Policy In All Schools**

The authority of this Ministerial Policy Statement is Section 27 (1) (h) of the Education Act (Chapter No. 163) as amended.

The purpose of this circular is to advise authorities of all institutions within the National Education System regarding the use of languages in schools. This statement should be read in conjunction with the Ministerial Policy Statement No. 1/91 and Secretary's Instruction No. 1/91.

The future direction for language use in the formal school system as stated in Secretary's circular No. 1/91 is that the language of the community, together with its cultures, spiritual and work practices will form the basis for the activities of the school.

In practice, using the language of the community as the basis for the school activities means the use of vernacular or a language spoken by both the students and the teacher in the school system for teaching and learning. The use of vernacular languages establishes strong culture bonding between children and their community. This is one of the aims of the education reform in Papua New Guinea. Research findings also support the use of vernacular languages in schools.

The findings indicate that:

- there are academic achievement benefits for the student from being bilingual
- to stop students learning in their first language and forcing them to learn only in a new language can be harmful and obstructive to their development
- it usually takes an English language learner five or more years to develop the ability to use English for learning complex concepts
- beginning schooling in the children's first language and using this language for continued learning and development while the English language is being learned, is the best way for children to develop their full potential in schooling.

On the basis of this information, the reform curriculum calls for a program of bilingual education in Primary Schools. Children who graduate from Elementary Schools will enter this new bilingual program in Grade 3.

1. At the Elementary School level (Prep to Elementary 2), this means that the language of instruction is completely in the children's vernacular language, or the community lingua franca, with an introduction to oral English at the end of Elementary 2. Children will leave Elementary School literate in their first language.

The community through their Parents and Citizens Association (P&C) and the Board of Management (BOM) will decide the language to be used at the Elementary level of education.

In practice, the community must be informed in order to make the decision on what language should be used at Elementary level. The language chosen should be the language that is shared in the community and used for most communication in that community.

2. At the Lower Primary level (Grades 3-5) the learning and teaching will be conducted in a bilingual situation, in which there is planned, gradual bridging from vernacular (or the lingua franca) to English. Oral and written vernacular language development will continue throughout Lower Primary. Oral and written English development will gradually be introduced and established as the major language of instruction by the end of Grade 5, using "Teaching English to Speakers of Other Languages" (TESOL) methodology.

At the Lower Primary level, while English is being learned, the language mostly used for teaching and learning should be the same language that the children used in Elementary school.

Where a number of active languages exist in one community, the main language of interaction between the language groups and of commerce in the community should be the language selected, that is the local lingua franca.

Every effort must be made to appoint vernacular speaking teachers to the Lower Primary grades, particularly those who have received inservice in bilingual education strategies.

3. At the Upper Primary level (Grades 6-8), class activities will be conducted with English as the main language of instruction, but students should still be provided with opportunities to further develop their oral and written vernacular (or lingua franca) skills.

4. At the Secondary level and Provincial High School level including Vocational School, lessons will be conducted in English. But advantage should be taken where opportunities arise for students to further develop their oral and written vernacular (or lingua franca) skills or if a concept can be better explained using the vernacular or lingua franca.

Whereas children must be encouraged to learn and use English, all schools at all levels should not discourage free communication in vernacular languages that the children speak in and out of school grounds. This will establish confidence in students to use vernacular in academic learning.

Honourable Prof. JOHN WAIKO, Ph.D, MP.  
**Minister for Education**



